

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PS	66621	8/15
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		71471	10/2

INDEX OF CLAIMS

- ✓ ..... Rejected
- || ..... Allowed
- (Through numeral)... Canceled
- + ..... Restricted
- N ..... Non-elected
- I ..... Interference
- A ..... Appeal
- O ..... Objected

Claim	Final	Original	Date
1	✓	5/3/02	
2	✓	11/21/02	
3	✓	6/20/03	
4	✓	12/1/04	
5	✓		
6	✓		
7	✓		
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46	✓		
47	✓		
48	✓		
49	✓		
50	✓		

Claim	Final	Original	Date
51	✓	2/5/02	
52	✓	2/12/02	
53	✓	6/20/03	
54	✓	1/20/04	
55	✓		
56	✓		
57	✓		
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100	✓		

Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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